



## BABY ARIZONA Provider Information Sheet

**Baby Arizona is a statewide program that provides early and continuous prenatal care to qualified low income pregnant women.**

**Baby Arizona encourages women to begin care early in their pregnancies, reducing the chances of maternal and neonatal complications. Providers play an important role in making Baby Arizona a success.**

### Here's how...

- Baby Arizona makes it easier for low income pregnant women to apply for medical insurance by shortening the application form and waiving the interview requirement.
- Free training is provided to participating physicians' office staff on how to prescreen and assist members with the streamlined application process at the first visit. This means that, up front, the office will have a good idea of a potential patient's eligibility status.
- A toll-free hotline and other community resources pre-screen and refer potential applicants to more than 160 current registered practices, health centers, and clinics throughout Arizona. In 2007, about 700 individuals were referred to participating Baby Arizona providers per month.
- Upon approval, AHCCCS enrollment is immediately activated. Patients are covered for pregnancy-related services from the beginning of the month they apply until approximately 60 days postpartum.
- If an AHCCCS application is submitted for an individual referred by Baby Arizona and that individual ultimately does not qualify, the provider agrees to continue care based on a reasonable payment plan.
- Providers may withdraw from participating in Baby Arizona at any time upon written notice.

Visit the Baby Arizona website at [www.babyarizona.gov](http://www.babyarizona.gov) to:

- Become a registered provider
- Research current participating providers
- Find other available community resources
- Order outreach materials and more...

<sup>1</sup> Pregnant women whose monthly income is below 150% of the Federal Poverty Level (FPL), are U.S. citizens or qualified non-alien and live in Arizona.

<sup>2</sup> If additional verification is needed, an eligibility specialist will request it directly from the patient.

<sup>3</sup> Source: DES 2007 Report.

<sup>4</sup> A provider agreement was in conjunction with the Arizona Medical Association.